

## AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Junichi Shirakawa et al.

Docket No.

P1267US

Application No.

Filing Date

Examiner

Customer No.

Group Art Unit

Confirmation No.

10730-569

Nov. 24, 2003

Arbes, C.

001218

3729

5715

Invention: APPARATUS FOR CONNECTING A TERMINAL-CONNECTED WIRE TO A CONNECTOR

OCT 14 2004

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

## CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	20 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$88.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- No additional fee is required for amendment.
- Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.
- A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
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- Any additional filing fees required under 37 C.F.R. 1.16.
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Dated: October 12, 2004

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

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(Date)

*Marie B. Bufalo*  
 Signature of Person Mailing Correspondence

Marie B. Bufalo

Typed or Printed Name of Person Mailing Correspondence

CC:



Group Art Unit 1629  
Examiner: Arbes, C.

Atty. Ref.: P1267US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Junichi Shirakawa et al.

Appl. No. : 10/720,569

Filed : November 24, 2003

For : APPARATUS FOR CONNECTING A TERMINAL-CONNECTED WIRE TO A CONNECTOR

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

This Amendment is submitted in response to the office action of September 8, 2004. Please amend the application as follows: